ILLINOIS CERTIFICATION FOR MEDICAL MALPRACTICE RATES

(215 ILCS 5/155.18) states that medical liability rates shall be certified in such filing by an officer of the company and a qualified actuary that the company's rates are based on sound actuarial principles and are not inconsistent with the company's experience.

(Name of officer typed or printed)		, a duly authorized officer
f(Name of Insurer typed or printed), an		, am authorized to certify
on behalf of the Company making this filing that the company's rates are based on sound actuarial principles and are not inconsistent with the company's experience, and that I am		
actuarial principles and are not inc	consistent with the co	mpany's experience, and that I am
knowledgeable of the laws, regulation	ons and bulletins applic	able to the policy rates that are the
subject of this filing.		
I,(Name of actuary type	oed or printed)	, a duly authorized actuary
of(Name of actuary f	y firm typed or printed) am authorized to certify	
on behalf of (Name of Insurance Co		
based on sound actuarial princ		
experience, and that I am knowledg		ations and bulletins applicable to the
policy rates that are the subject of this	s filing.	
Signature and Title of Authorized Insurance Company Officer		r Date
G' . T'.1 1D ' .' CA	.1 . 1	
Signature, Title and Designation of Authorized Actuary		Date
Insurance Company FEIN	Eilina Mu	·····hou
insurance Company FEIN	Filling Nu	IIII0eI
Insurer's Address		
misurer's Address		
City	State	Zin Code
<u></u>	State	Zip Code
Contact Person's:		
-Name and E-mail		
-Direct Telephone and Fax Number		